

STATE OF ARKANSAS **BOARD OF REGISTRATION FOR FORESTERS**

3821 West Roosevelt Road LITTLE ROCK, AR 72204

TELEPHONE: (501) 296-1998

To Whom It May Concern:				
The following person,	of			
(applicant's name)	(county, state)			
has applied for a license as a Registered	Forester in the State of Arkansas under the			
provisions of Arkansas Code § 17-31-10	1 through § 17-31-310. Under the provisions of this			
code, the applicant is required to furnish	evidence satisfactory to the Board that the applicant			
is qualified to practice forestry. The app	licant refers to you as one who has information			
concerning the applicant's character, abi	lity, reputation, and professional attainments. The			
Board has the responsibility of registerin	g only those who are qualified to practice forestry in			
any of its branches, to the end that provis	sions of this Code, the Board asks your cooperation			

The Board wishes to point out that the statements submitted must be from personal knowledge only. The statements that you make will be taken as deliberate, and made with the full realization of the responsibility toward the public involved. Please answer the questions on the back of this sheet carefully, completely, and with the utmost frankness. We assure you that the information you furnished will be treated by the Board as strictly confidential.

Sincerely,

ARKANSAS BOARD OF REGISTRATION FOR FORESTERS

in providing information about this applicant.

Robert J. McFarland, R. F.

Executive Director

RJM/ over

Information concerning		
Q	(Applicant's Name)	

*ANSWERS TO BE GIVEN FROM PERSONAL KNOWLEDGE ONLY

State the position the applicant fills. Is the applicant in charge of important fores If the applicant is in private practice, please Do you recommend the applicant for a licer the best of my knowledge and believements are true and correct. (date)	indicate the nature as a registere	please explain. ure of such practice. d forester?
State the position the applicant fills Is the applicant in charge of important fores If the applicant is in private practice, please	indicate the nat	please explain. ure of such practice.
State the position the applicant fills Is the applicant in charge of important fores	try work?	please explain.
State the position the applicant fills	try work?	please explain.
State the position the applicant fills		
its name and address.	thership, or cor	poration, piease give
Would you employ the applicant in a positi	on of trust?	Yes No If no
	have responsibi	lity for forestry work?
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How long have you know the applicant? Fi		Licelise #
Are you a graduate Forester? Yes		Liganga #
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		(state) (Zip code)
	Address	What is your present business or profession? If forester, your employer Yes No If a registered forester, what state? How long have you know the applicant? From Are you in any way related to the applicant? If yes, ho What has been your business connection with the applicant? Do you know anything reflecting adversely on the applicant good character? No Yes, if yes, please explain What is the applicant's character, reputation, and standing in Yes No If no, please explain Yes No If no, please explain If the applicant is connected with a firm, partnership, or conits name and address In